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## \*BIBDATASHEET\*

CONFIRMATION NO. 8622

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/655,930	<b>FILING OR 371(c) DATE</b> 09/05/2003 <b>RULE</b>	<b>CLASS</b> 132	<b>GROUP ART UNIT</b> 3732	<b>ATTORNEY DOCKET NO.</b> P07667US01
<b>APPLICANTS</b> Martha Kelsey, Fairfield, IA;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/410,090 09/12/2002				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 12/03/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> IA	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 15
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> 22885				
<b>TITLE</b> METHOD AND DEVICE FOR USING STYLING TAPE FOR BODY AND HAIR ACCESSORIZING				
<b>FILING FEE RECEIVED</b> 950	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	